

POSITION	INT'L'S	ID NO.	DATE
FEE DETERMINATION	C H		10-01-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	M D	S 7-	10/31/01
RESPONSE FORMALITY REVIEW	A T	1071	01/04/02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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530
11-01-01
870-2